stryker®
Medical

Renaissance Series

1060 OB/GYN Stretcher

Operations Manual

For Parts or Technical Assistance
800–327–0770

Table of Contents

Introduction 2, 3
Operating Base Controls 4, 5
Raising And Lowering Litter Height 6
Trendelenburg/Reverse Trendelenburg Positioning 6
Applying The Brake System 7
Operating 5th Wheel Option 7
Using Siderails 8
Operating Optional Permanently Attached I.V. Poles 9, 10
Using The Safr™ Patient Transfer Board/Arm Board 11, 12
Operating The Fowler 12
Operating The Foot Pans 13
Removing The Foot End Mattress Assembly 13
Using Push Handles 13
Operating The Leg Supports 14
Installing/Removing The Fluid Collection Pan 14
Preventative Maintenance Checklist 15
Cleaning 16
Limited Warranty
- Obtaining Parts And Service 17
- Supplemental Warranty Coverage 17
- Return Authorization 18
- Freight Damage Claims 18

INTRODUCTION

This manual is designed to assist you with the operation of the 1060 OB/GYN Trauma Stretcher. Read it thoroughly before using the equipment or beginning any maintenance on it.

SPECIFICATIONS

Maximum Weight Capacity	400 pounds
Overall Bed Length/Width	86.5”/31.75”
Minimum/Maximum Bed Height	22.5”/36”
Bed Weight w/Accessories	410 pounds
Fowler Angle	0 to 90°
Trendelenburg/Reverse Trendelenburg	–18° to +12°

Stryker reserves the right to change specifications without notice.

WARNING / CAUTION / NOTE DEFINITION

The words WARNING, CAUTION and NOTE carry special meanings and should be carefully reviewed.

WARNING

The personal safety of the patient or user may be involved. Disregarding this information could result in injury to the patient or user.

CAUTION

These instructions point out special procedures or precautions that must be followed to avoid damaging the equipment.

NOTE

This provides special information to make maintenance easier or important instructions clearer.

Introduction

Before operating this stretcher, it is important to read and understand all information in this manual. Carefully read and strictly follow the warnings listed on this page.

WARNING

Be sure to move any equipment that may be in the way before raising or lowering the litter height.

Always apply the caster brakes when a patient is getting on or off the stretcher. Push on the stretcher to ensure the brakes are securely locked. Always engage the brakes unless the stretcher is being moved. Injury could result if the stretcher moves while a patient is getting on or off the stretcher. If brakes do not hold properly, refer to your stretcher maintenance manual for a brake adjustment procedure.

Be sure the siderail latching mechanism is working properly at all times. If it is not, refer to your stretcher maintenance manual for ”Siderail Latch Adjustment”.

When lowering the siderail to the collapsed position, keep extremities of patients and staff away from the siderail spindles or injury could occur.

To avoid injury or damage to the equipment, do not allow the siderail to lower on its own.

The weight of the I.V. bags should not exceed 40 pounds.

When using the SAFR Board to transfer a patient, **always** lock the brakes on all stretchers, beds, etc. being used and **always** be certain the transfer board is placed securely on the surface of the mating stretcher or bed. The patient stretcher and the mating surface must be at the same height before the patient is transferred.

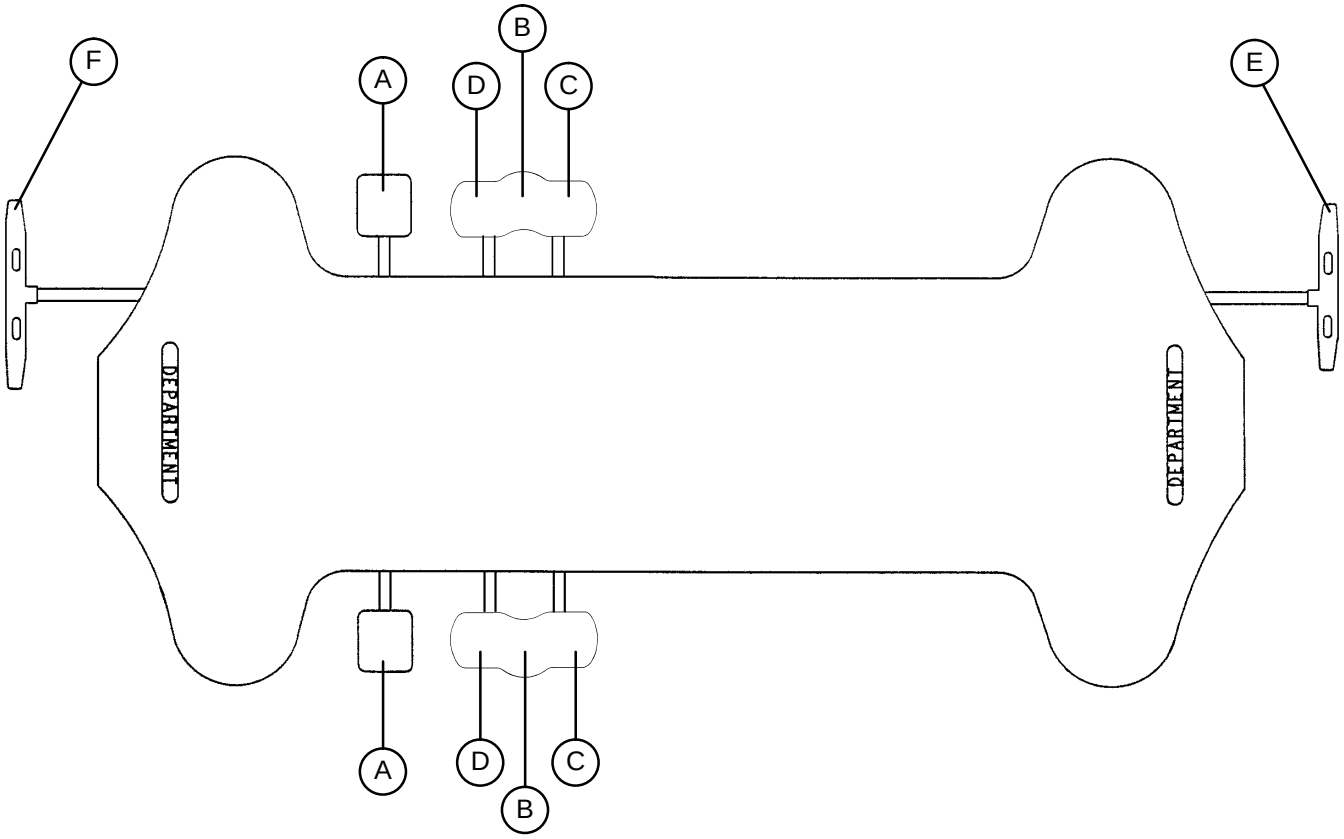
If pneumatic system appears to be difficult to operate, refer to the stretcher maintenance manual for “Pneumatic Fowler Adjustment”

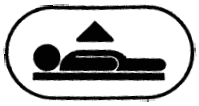
Keep hands/fingers clear of area between spine tubes and Fowler when lowering. Injury could result.

The push handles should always be used when transporting patients. They were installed for this purpose for user convenience. Avoid using other parts of the stretcher as push devices as damage may occur.

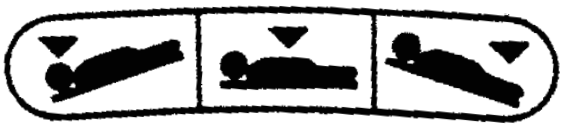
Stretcher Operation

OPERATING BASE CONTROLS – SIDE CONTROL WITH UNI–LOWER PEDAL





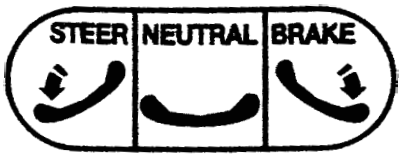
(A) Pump to raise litter.



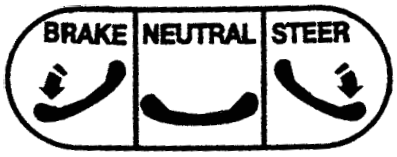
(B) Depress in the center of pedal (B) to lower both ends of the stretcher together.

(C) Depress the side of pedal (B) closest to the foot end of the stretcher to lower the foot end.

(D) Depress the side of pedal (B) closest to the head end of the stretcher to lower the head end.



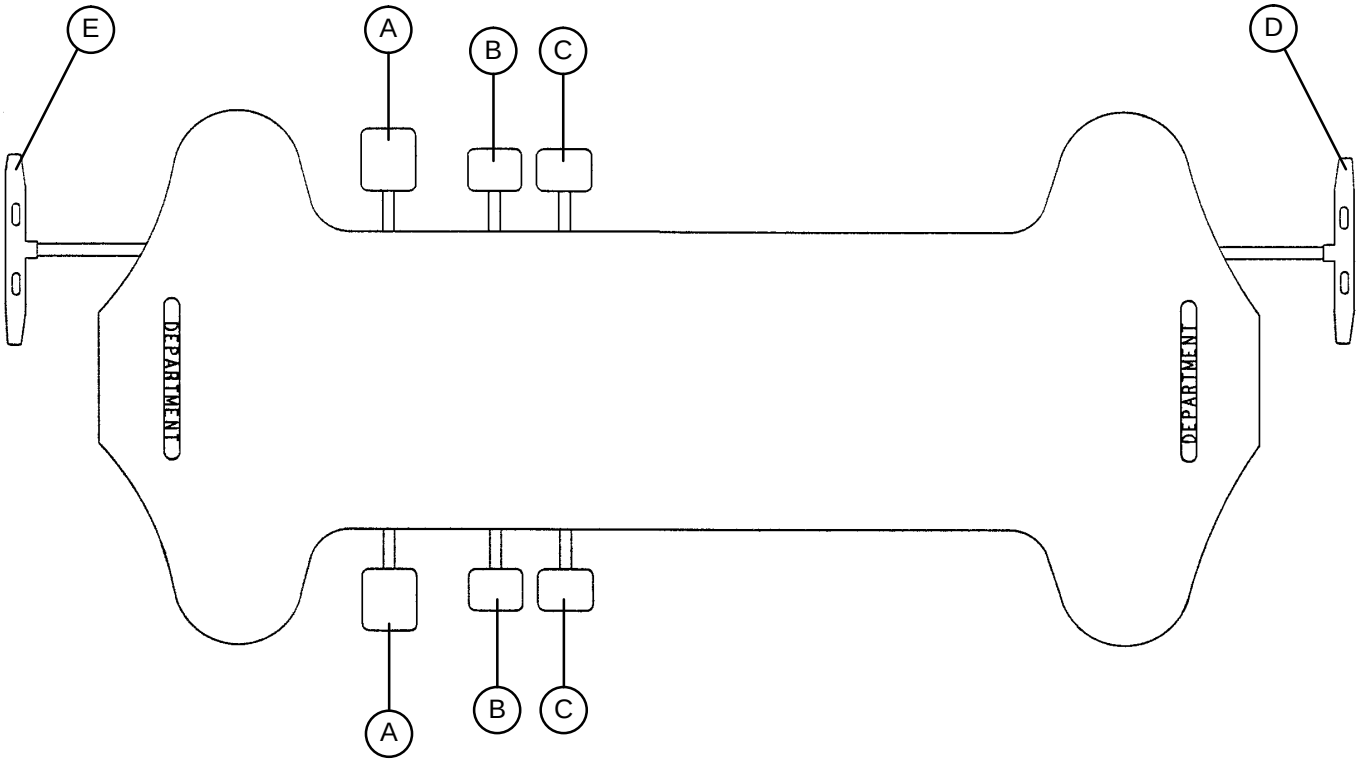
(E) Brake and Steer functions (foot end).

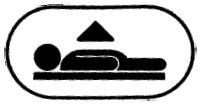


(F) Brake and Steer functions (head end).

Stretcher Operation

OPERATING BASE CONTROLS – SIDE CONTROL WITH DUAL LOWERING PEDALS



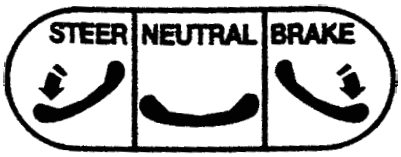


(A) Pump to raise litter.

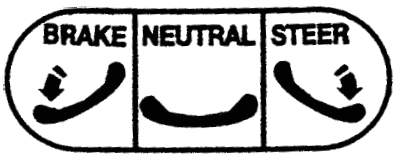
(B) Depress to lower head end.

(C) Depress to lower foot end.

Note: Depress B & C together to lower both ends of the litter simultaneously.



(D) Brake and Steer functions (foot end)



(E) Brake and Steer functions (head end)

Stretcher Operation

RAISING AND LOWERING LITTER HEIGHT – SIDE CONTROL/UNI–LOWER PEDAL

CAUTION

Be sure to move any equipment that may be in the way before raising or lowering the litter height.

To **raise** the litter height, pump pedal (A) repeatedly until the desired height is achieved (see illustration on page 4).

To **lower** both ends of the litter together, depress the center of pedal (B). To lower only the head end of the litter, depress the side of pedal (B) closest to the head end. To lower only the foot end of the litter, depress the side of pedal (B) closest to the foot end. The base may be equipped with optional variable descent controls. With variable descent controls, the farther you press down on the pedal, the faster the litter will lower.

RAISING AND LOWERING LITTER HEIGHT – SIDE CONTROL/DUAL LOWERING PEDALS

CAUTION

Be sure to move any equipment that may be in the way before raising or lowering the litter height.

To **raise** the litter height, pump pedal (A) repeatedly until the desired height is achieved (see illustration on page 5).

To **lower** both ends of the litter simultaneously, depress pedal (B) and (C) together using the same foot.. To lower only the head end of the litter, depress pedal (B). To lower only the foot end of the stretcher, depress pedal (C) (see illustration on page 5). The base may be equipped with optional variable descent controls. With variable descent controls, the farther you press down on the pedal, the faster the litter will lower.

TRENDELENBURG/REVERSE TRENDELENBURG – SIDE CONTROL/UNI–LOWER PEDAL

NOTE
Litter height must be raised first in order to achieve a trend. or reverse trend. position.

CAUTION

Be sure to remove any equipment that may be in the way before lowering stretcher.

For **Trendelenburg** positioning (head down), depress the side of pedal (B) closest to the head end of the stretcher (see illustration, page 4).

For **Reverse Trendelenburg** positioning (foot down), depress the side of pedal (B) closest to the foot end.

NOTE
The higher the litter is before pedal (B) is activated, the greater the trend. or reverse trend. angle will be. (Maximum trend. angle is +12°. Maximum reverse trend. angle is –18°).

TRENDELENBURG/REVERSE TRENDELENBURG – SIDE CONTROL/DUAL LOWERING PEDALS

NOTE
Litter height must be raised first in order to achieve a trend. or reverse trend. position.

CAUTION

Be sure to remove any equipment that may be in the way before lowering stretcher.

For **Trendelenburg** positioning (head down), depress pedal (B) (see illustration, page 5).

For **Reverse Trendelenburg** positioning (foot down), depress pedal (C) (see illustration on page 5).

APPLYING THE BRAKE SYSTEM

NOTE
For user convenience, the brake/steer pedal is located on both ends of the stretcher.

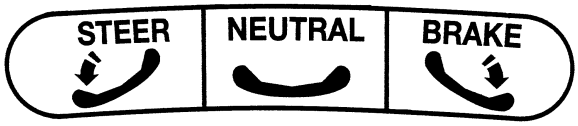
WARNING

Always apply the caster brakes when a patient is getting on or off the stretcher. Push on the stretcher to ensure the brakes are securely locked. Always engage the brakes unless the stretcher is being moved. Injury could result if the stretcher moves while a patient is getting on or off the stretcher. If brakes do not hold properly, refer to your stretcher maintenance manual for a brake adjustment procedure.

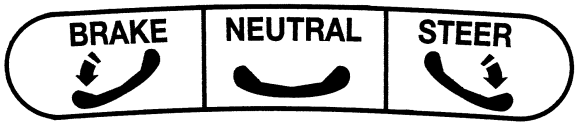
To engage the brakes on the head end, push fully down on the left side of pedal (E) (see page 5).

To engage the brakes on the foot end, push fully down on the right side of pedal (D) (see page 5).

NOTE
Your stretcher may be equipped with optional side control brake and steer functions in addition to the standard head and foot end controls. The side control brakes operate the same as the head and foot end versions. They are indicated by a label on each side of the stretcher base.



RIGHT SIDE



LEFT SIDE

OPTIONAL SIDE CONTROL BRAKE/STEER

OPERATING DIRECTIONAL STEERING CASTER/5TH WHEEL OPTIONS

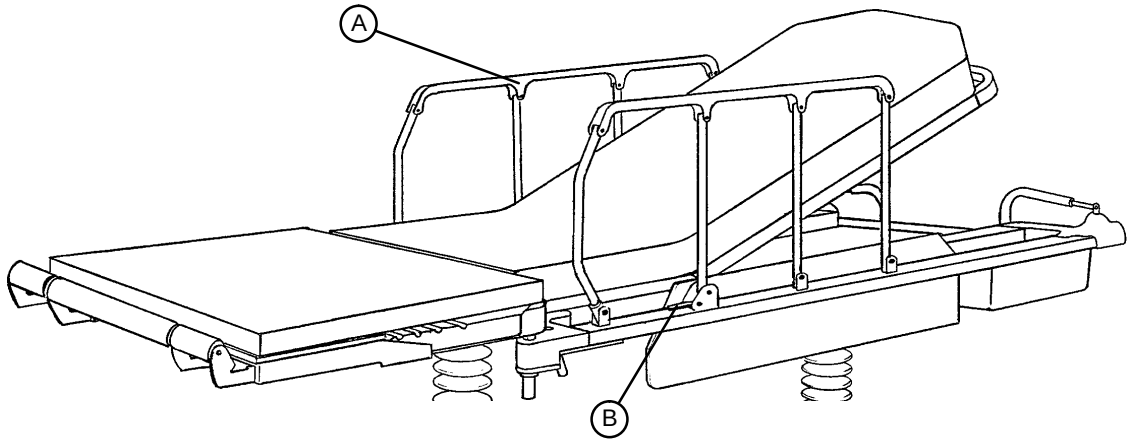
The purpose of the steer wheel and 5th wheel options is to help guide the stretcher when transporting a patient along a straight line and also for pivoting at corners.

To engage the steer wheel/5th wheel, push the proper side of the brake/steer pedal to the full down position.

NOTE
Stretchers cannot be equipped with both steering caster and fifth wheel options. The choice was made at the time the stretcher was purchased.

The steer wheel is located at the foot end of the stretcher on the patient's left. The 5th wheel is located underneath the center of the base assembly.

USING SIDERAILS



CAUTION

Be sure the siderail latching mechanism (B) is working properly at all times. If it is not, refer to your stretcher maintenance manual for ”Siderail Latch Adjustment”.

To engage siderails: Pull up siderail (A) and raise to full up position so that latch (B) engages. (See illustration).

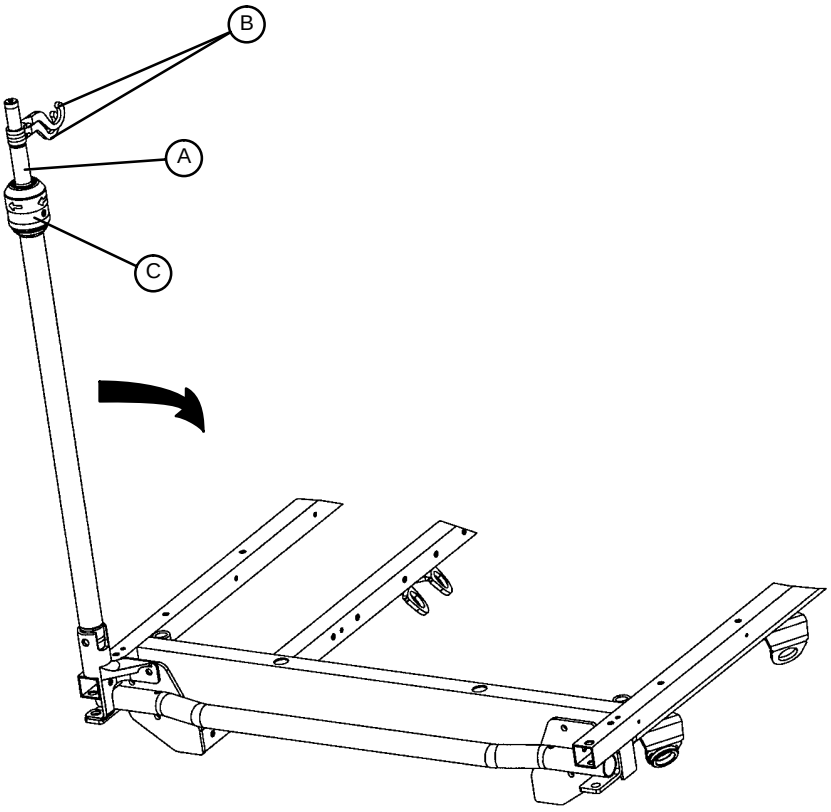
To disengage siderails: Pull up on latch (B) and guide siderail to the full down position.

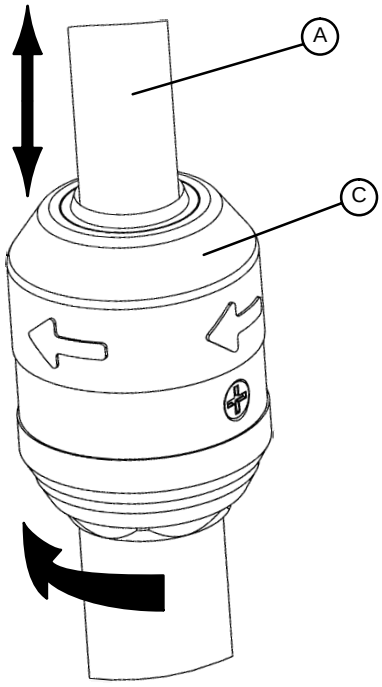
WARNING

When lowering the siderail to the collapsed position, keep extremities of patients and staff away from the siderail spindles or injury could occur.

To avoid injury or damage to the equipment, do not allow the siderail to lower on its own.

OPERATING OPTIONAL 2–STAGE PERMANENTLY ATTACHED I.V. POLE





DETAIL OF I.V. POLE LATCH

NOTE

The 2–stage permanently attached I.V. pole is an option and may have been installed at either the head, foot or both ends of the stretcher. The choice was made at the time the stretcher was purchased.

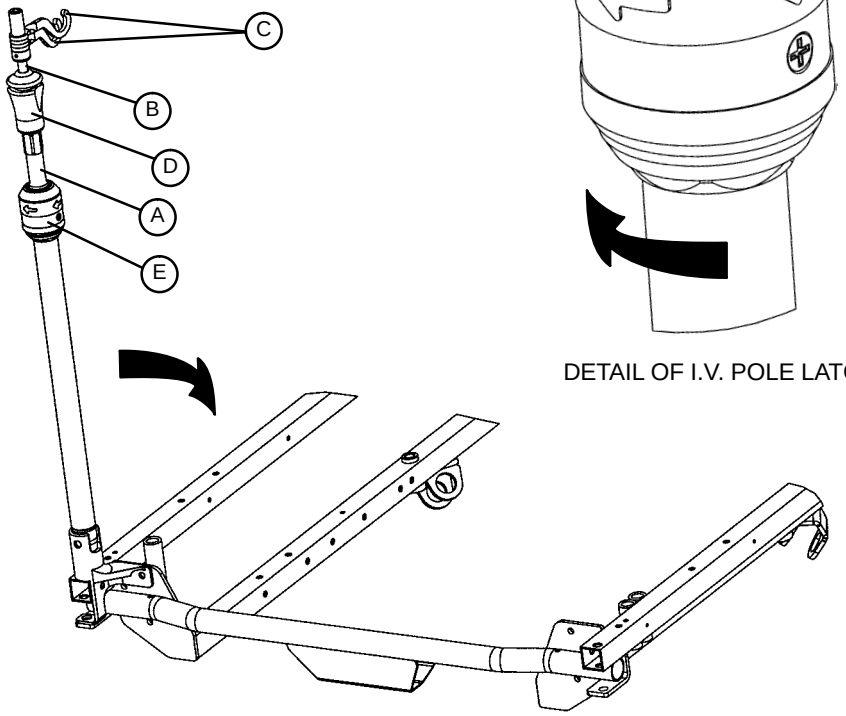
To use the 2–stage permanently attached I.V. pole:

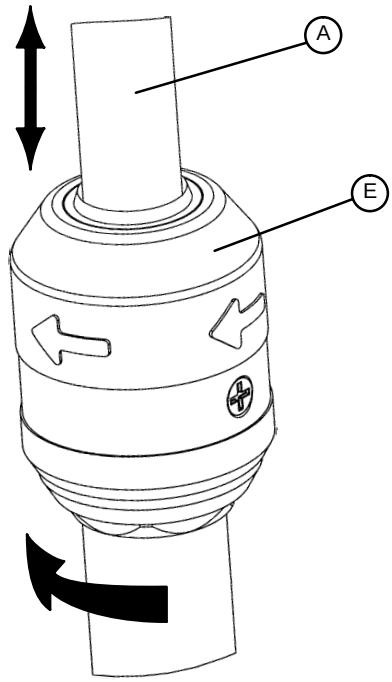
1. Lift and pivot the pole from the storage position and push down until it is locked into the receptacle.
2. To raise the height of the pole, pull up on the telescoping portion (A) until it locks into place at its fully raised position.
3. Rotate the I.V. hangers (B) to desired position and hang the I.V. bags.
4. To lower the I.V. pole, turn the latch (C) clockwise until section (A) lowers.

CAUTION

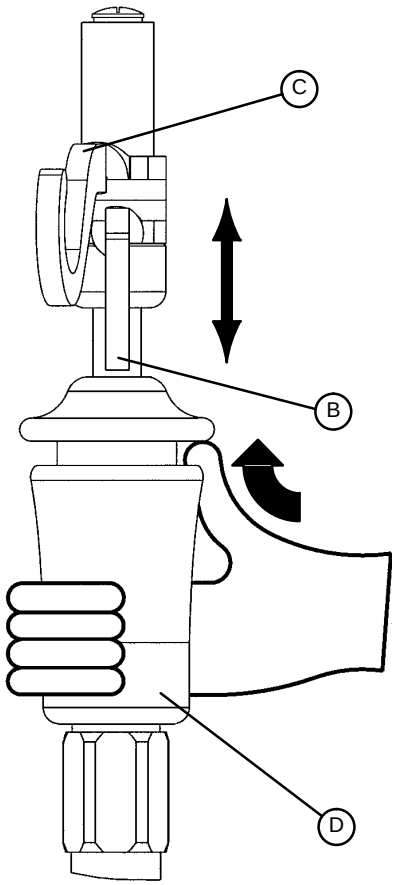
The weight of the I.V. bags should not exceed 40 pounds.

OPERATING OPTIONAL 3–STAGE PERMANENTLY ATTACHED I.V. POLE





DETAIL OF I.V. POLE LATCH



DETAIL OF I.V. POLE GRIP

NOTE

The 3–stage permanently attached I.V. pole is an option and may have been installed at either the head, foot or both ends of the stretcher. The choice was made at the time the stretcher was purchased.

To use the 3–stage permanently attached I.V. pole:

1. Lift and pivot the pole from the storage position and push down until it is locked into the receptacle.
2. To raise the height of the pole, pull up on the telescoping portion (A) until it locks into place at its fully raised position.
3. For a higher I.V. pole, pull up on section (B). Release section (B) at any desired height and it will lock into place.
4. Rotate the I.V. hangers (C) to the desired position and hang the I.V. bags.
5. To lower the I.V. pole, push up on the red portion of grip (D) while holding onto section (B) until it lowers. Turn latch (E) clockwise until section (A) lowers.

CAUTION

The weight of the I.V. bags should not exceed 40 pounds.

USING THE SAFR PATIENT TRANSFER BOARD

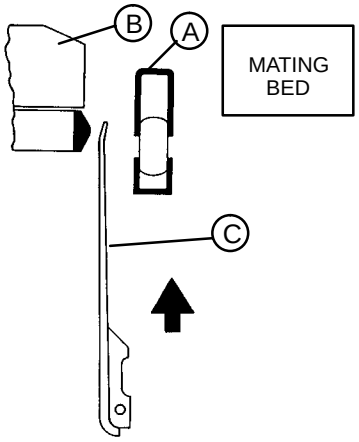
WARNING

When using the SAFR Board to transfer a patient, **always** lock the brakes on all stretchers, beds, etc. being used and **always** be certain the transfer board is placed securely on the surface of the mating stretcher or bed. The patient stretcher and the mating surface must be at the same height before the patient is transferred.

Transferring Patients:

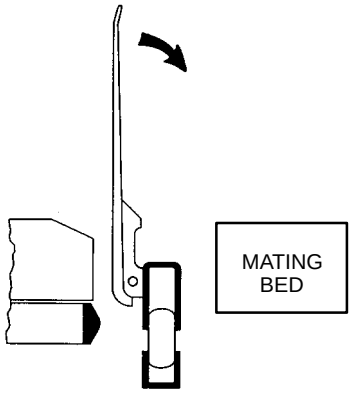
Note

The transfer board (C) is located between the siderail (A) and the mattress (B). (See illustration).

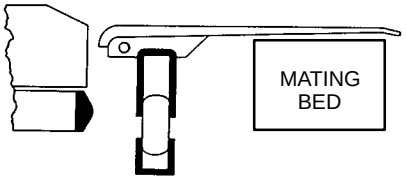


1. Lower siderail (A) to full down position.

2. Raise the transfer board (C) from the bottom while lifting from the top.



3. When the transfer board is fully raised, it can be pivoted downward onto the surface of the mating bed or stretcher.

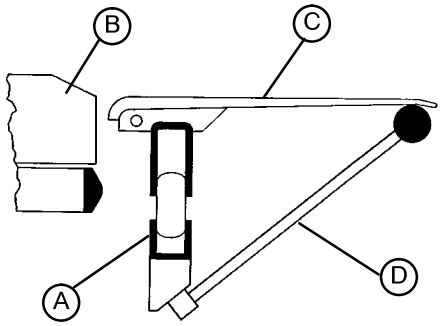


Important: Be sure the brakes have been applied on both the stretcher and the mating bed or stretcher before beginning step 4.

4. Using a sheet, draw the patient onto the mating bed or stretcher.

USING THE SAFR PATIENT TRANSFER BOARD/ARM BOARD (CONTINUED)

Using the SAFR Board as an armboard:



2. Raise the support post (D) to the up position.

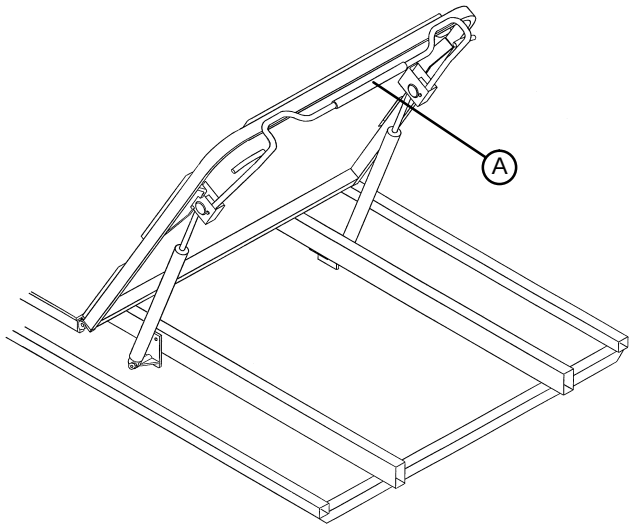
3. Raise the transfer board (C) from the bottom while lifting from the top.

4. When the transfer board is fully raised, it can be pivoted downward onto the support post (D).

CAUTION

When the SAFR Board is being used to transfer a patient, the support post (D) must be in the stored (down) position. Damage to the support post will occur if it is pushed up against a stretcher, table, etc.

OPERATING THE FOWLER



Squeeze handle (A) for pneumatic assistance in lifting the Fowler to the desired height. Remove hand(s) fro handle when the desired height is achieved.

To lower the Fowler, squeeze handle (A) and push down until the Fowler has reached the desired height. Remove your hand(s) from the handle when the desired height is achieved.

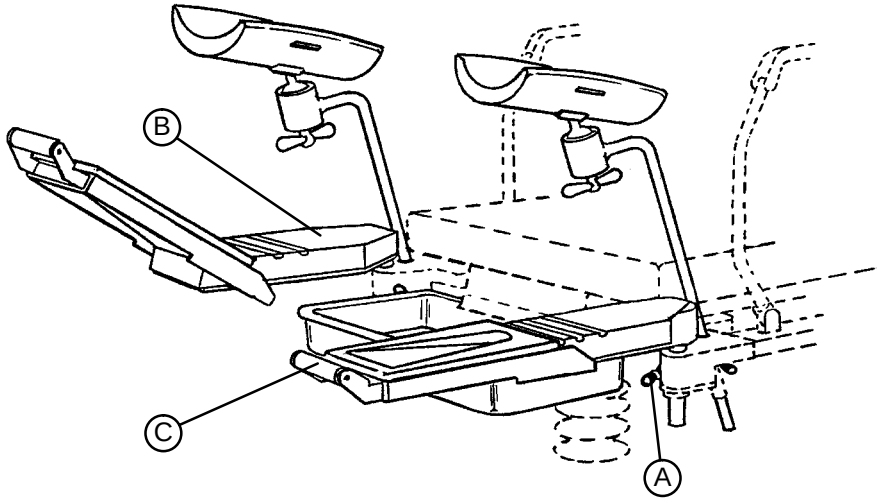
CAUTION

If the pneumatic system appears to be difficult to operate, refer to your maintenance manual for a pneumatic Fowler adjustment procedure.

WARNING

Keep hands/fingers clear of the area around the Fowler release handle and the Fowler frame when lowering the Fowler. Injury could result if care is not taken when lowering the Fowler.

OPERATING THE FOOT PANS/REMOVING THE FOOT END MATTRESS ASSEMBLY



1. To rotate foot pans outward, loosen knob (A), grasp foot rest section (B), lift, and rotate outwards to desired position. Tighten knob (A) to secure position of foot pan assembly.
2. To position foot rests, lift upward by front push bar (C) and slide foot rest along slotted section of foot pan assembly. Lower foot rest so it engages in desired slot on foot pan assembly.
3. Position patient's legs in foot rests. The foot rests and pans can be adjusted for maximum access and for patient comfort.
4. Remove foot end mattress assembly: grasp mattress assembly on both sides and slide it forward so it disengages from the brackets. Mattress assembly can then be lifted away from stretcher.

NOTE
For easier patient access to stretcher, remove foot end mattress assembly and fully lower litter. Patient can now easily sit on litter at foot end of stretcher.

5. To remove foot rests for cleaning, rotate lever on latch assembly located under foot rest, and lift foot rest off stretcher.

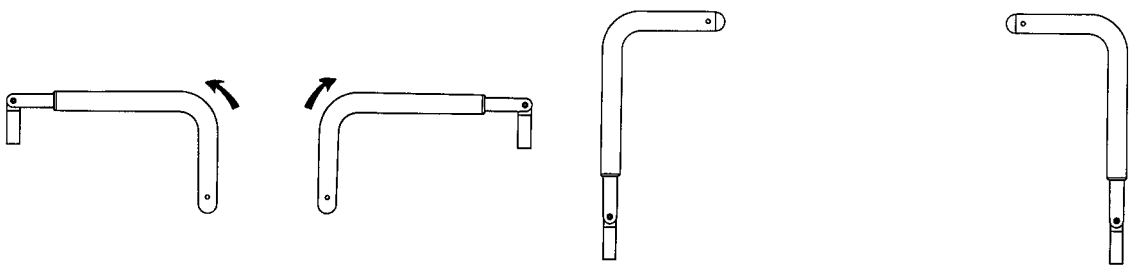
USING PUSH HANDLES

CAUTION

The push handles should always be used when transporting patients. Avoid using other parts of the stretcher as push devices or damage may occur.

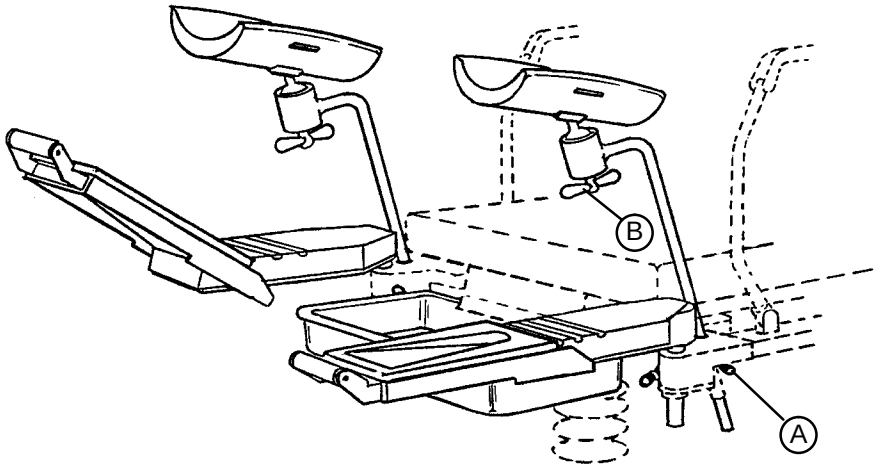
To use the push handles:
Pivot the handles up and push down until they are locked into position.

To store the push handles:
Lift the handles up and pivot them down to store in the handle rests.



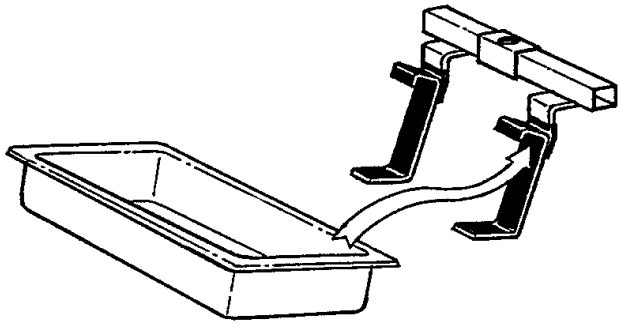
Stretcher Operation

OPERATING THE LEG SUPPORTS



1. Install leg support into foot end bracket as shown in the illustration.
2. Adjust to desired height and tighten knob (A) to secure in place.
3. Adjust leg rest to desired position and tighten knob (B) to secure in place.

INSTALLING/REMOVING THE FLUID COLLECTION PAN



1. Grasp pan on both sides. Tilt front edge of pan upward.
2. Insert back edge of pan under brackets and lower front edge, being sure brackets catch on back edge of pan.
3. To remove, grasp pan firmly on both sides. Tilt front edge upward, move pan down and pull it forward and out of brackets.

Preventative Maintenance

CHECKLIST

_____ All fasteners secure
_____ Siderails move and latch properly
_____ Engage brake pedal and push on the stretcher to ensure all casters lock securely
_____ Steer function working properly
_____ All casters secure and swivel properly
_____ Body restraints working properly
_____ I.V. pole intact and operating properly
_____ Oxygen bottle holder intact and operating properly
_____ Fowler operates and latches properly
_____ Trendelenburg/Reverse Trendelenburg operating properly
_____ No rips or cracks in mattress cover
_____ Arm boards intact and operating properly
_____ Arm board support levers intact and operating properly
_____ Ground chain intact
_____ No leaks at hydraulic connections
_____ Hydraulic jacks holding properly
_____ Hydraulic drop rate set properly
_____ Hydraulic oil level sufficient
_____ Lubricate where required, including the brake adjuster assembly and the brake cam
_____ Foot pan assemblies intact and operating properly
_____ Accessories and mounting hardware in good condition and working properly

Serial No._____
_____
_____
_____
_____

Completed By:_____ Date:_____

NOTE

Preventative maintenance should be performed at a minimum of annually. A preventative maintenance program should be established for all Stryker Medical equipment. Preventative maintenance may need to be performed more frequently based on the usage level of the product.

Cleaning

Hand wash all surfaces of the stretcher with warm water and mild detergent. Dry thoroughly. DO NOT STEAM CLEAN, PRESSURE WASH, HOSE OFF OR ULTRASONICALLY CLEAN. Using these methods of cleaning is **not** recommended and may void this product's warranty.
Clean Velcro **AFTER EACH USE**. Saturate Velcro with disinfectant and allow disinfectant to evaporate. (Appropriate disinfectant for nylon Velcro should be determined by the hospital.)

In general, when used in those concentrations recommended by the manufacturer, either phenolic type or quaternary type disinfectants can be used. Iodophor type disinfectants are not recommended for use because staining may result. The following products have been tested and have been found not to have a harmful effect WHEN USED IN ACCORDANCE WITH MANUFACTURERS RECOMMENDED DILUTION.*

TRADE NAME	DISINFECTANT TYPE	MANUFACTURER	*MANUFACTURER'S RECOMMENDED DILUTION
A33	Quaternary	Airwick (Professional Products Division)	2 ounces/gallon
A33 (dry)	Quaternary	Airwick (Professional Products Division)	1/2 ounce/gallon
Beaucoup	Phenolic	Huntington Laboratories	1 ounce/gallon
Blue Chip	Quaternary	S.C. Johnson	2 ounces/gallon
Elimstaph	Quaternary	Walter G. Legge	1 ounce/gallon
Franklin Phenomysan F2500	Phenolic	Purex Corporation	1 1/4 ounce/gallon
Franklin Sentinel	Quaternary	Purex Corporation	2 ounces/gallon
Galahad	Phenolic	Puritan Churchill Chemical Company	1 ounce/gallon
Hi–Tor	Quaternary	Huntington Laboratories	1/2 ounce/gallon
LPH	Phenolic	Vestal Laboratories	1/2 ounce/gallon
Matar	Phenolic	Huntington Laboratories	1/2 ounce/gallon
Omega	Quaternary	Airwick (Professional Products Division)	1/2 ounce/gallon
Quanto	Quaternary	Huntington Laboratories	1 ounce/gallon
Sanikleen	Quaternary	West Chemical Products	2 ounces/ gallon
Sanimaster II	Quaternary	Service Master	1 ounce/gallon
Vesphene	Phenolic	Vestal Laboratories	1 1/4 ounce/ gallon

Quaternary Germicidal Disinfectants, used as directed, and/or Chlorine Bleach products, typically 5.25% Sodium Hypochlorite in **dilutions ranging between 1 part bleach to 100 parts water, and 2 parts bleach to 100 parts water are not considered mild detergents. These products are corrosive in nature and may cause damage to your stretcher if used improperly.** If these types of products are used to clean Stryker patient handling equipment, measures must be taken to insure the stretchers are rinsed with clean water and thoroughly dried following cleaning. Failure to properly rinse and dry the stretchers will leave a corrosive residue on the surface of the stretcher, possibly causing premature corrosion of critical components.

NOTE
Failure to follow the above directions when using these types of cleaners may void this product's warranty.

REMOVAL OF IODINE COMPOUNDS

This solution may be used to remove iodine stains from mattress cover and foam footrest pad surfaces.

1. Use a solution of 1–2 tablespoons Sodium Thiosulfate in a pint of warm water to clean the stained area. Clean as soon as possible after staining occurs. If stains are not immediately removed, allow solution to soak or stand on the surface.
2. Rinse surfaces which have been exposed to the solution in clear water before returning bed to service.

Warranty

Limited Warranty:

Stryker Medical Division, a division of Stryker Corporation, warrants to the original purchaser that its products should be free from defects in material and workmanship for a period of one (1) year after date of delivery. Stryker's obligation under this warranty is expressly limited to supplying replacement parts and labor for, or replacing, at its option, any product which is, in the sole discretion of Stryker, found to be defective. Stryker warrants to the original purchaser that the frame and welds on its beds will be free from structural defects for as long as the original purchaser owns the bed. If requested by Stryker, products or parts for which a warranty claim is made shall be returned prepaid to Stryker's factory. Any improper use or any alteration or repair by others in such manner as in Stryker's judgement affects the product materially and adversely shall void this warranty. No employee or representative of Stryker is authorized to change this warranty in any way.

This statement constitutes Stryker's entire warranty with respect to the aforesaid equipment. STRYKER MAKES NO OTHER WARRANTY OR REPRESENTATION, EITHER EXPRESSED OR IMPLIED, EXCEPT AS SET FORTH HEREIN. THERE IS NO WARRANTY OF MERCHANTABILITY AND THERE ARE NO WARRANTIES OF FITNESS FOR ANY PARTICULAR PURPOSE. IN NO EVENT SHALL STRYKER BE LIABLE HEREUNDER FOR INCIDENTAL OR CONSEQUENTIAL DAMAGES ARISING FROM OR IN ANY MANNER RELATED TO SALES OR USE OF ANY SUCH EQUIPMENT.

To Obtain Parts and Service:

Stryker products are supported by a nationwide network of dedicated Stryker Field Service Representatives. These representatives are factory trained, available locally, and carry a substantial spare parts inventory to minimize repair time. Simply call your local representative, or call Stryker Customer Service at (800) 327–0770.

Supplemental Warranty Coverage:

Stryker has developed a comprehensive program of extended warranty options designed to keep your equipment operating at peak performance at the same time it eliminates unexpected costs. We recommend that these programs be activated *before* the expiration of the new product warranty to eliminate the potential of additional equipment upgrade charges. Stryker offers the following Supplemental Warranties:

Extended (Parts and Labor)

- All replacement parts (excluding mattresses and consumable items)
- Labor and travel for *all* scheduled and unscheduled calls
- Annual Preventive Maintenance Inspections and repairs
- JCAHO paperwork for preventive maintenance
- Priority Emergency Service

Standard (Labor Only):

- Labor and travel for *all* scheduled and unscheduled calls
- Annual Preventive Maintenance Inspections and repairs
- JCAHO paperwork for preventive maintenance
- Priority Emergency Service

Basic (Parts Only):

- All replacement parts (excluding mattresses and consumable items)
- Priority Emergency Service

Please call your local representative, or call (800) 327–0770 for further information

Warranty

Return Authorization:

Merchandise cannot be returned without approval from the Stryker Customer Service Department. An authorization number will be provided which must be printed on the returned merchandise. Stryker reserves the right to charge shipping and restocking fees on returned items.

SPECIAL, MODIFIED, OR DISCONTINUED ITEMS NOT SUBJECT TO RETURN.

Damaged Merchandise:

ICC Regulations require that claims for damaged merchandise must be made with the carrier within fifteen (15) days of receipt of merchandise. DO NOT ACCEPT DAMAGED SHIPMENTS UNLESS SUCH DAMAGE IS NOTED ON THE DELIVERY RECEIPT AT THE TIME OF RECEIPT. Upon prompt notification, Stryker will file a freight claim with the appropriate carrier for damages incurred. Claim will be limited in amount to the actual replacement cost. In the event that this information is not received by Stryker within the fifteen (15) day period following the delivery of the merchandise, or the damage was not noted on the delivery receipt at the time of receipt, the customer will be responsible for payment of the original invoice in full.

Claims for any short shipment must be made within thirty (30) days of invoice.

International Warranty Clause:

This warranty reflects U.S. domestic policy. Warranty outside the U.S. may vary by country. Please contact your local Stryker Medical representative for additional information.

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